

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|--------------------|--------------------|----------------|
| FEE DETERMINATION | <i>[Signature]</i> | <i>[Signature]</i> | <i>2/1-00</i> |
| O.I.P.E. CLASSIFIER | <i>[Signature]</i> | <i>45</i> | <i>2/16</i> |
| FORMALITY REVIEW | <i>[Signature]</i> | <i>60125</i> | <i>3/31/00</i> |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
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Best Available Copy

If more than 150 claims or 10 actions
staple additional sheet here

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